U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Small PHA Plan Update Annual Plan for Fiscal Year: 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Housing Authority of Pineville
PHA Number: KY039
PHA Fiscal Year Beginning: (mm/yyyy) 04/2001
PHA Plan Contact Information: Name: Yolanda Green Phone: 606/337-2900 TDD: 1-800-648-6056 Email (if available):
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)
PHA Programs Administered:
□ Public Housing and Section 8 □ Section 8 Only □ Public Housing Only

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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	included in PHA Plan text)	27
	Other (List below, providing each attachment name)	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

NOT REQUIRED

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The only policy and/or program changes for the upcoming year are the HUD mandated requirements of the implementation of a Pet Policy, the Community Service and Self-Sufficiency Policy, and the affects these have on the Admissions and Occupancy Policy and the Dwelling Lease.

2. Capital Improvement Needs
[24 CFR Part 903.7 9 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$\frac{\$371,773}{}\$
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
D. Capital Fund Program Grant Submissions
(1) Capital Fund Program 5-Year Action Plan
The Capital Fund Program 5-Year Action Plan is provided as Attachment C.
(2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment B
3. Demolition and Disposition [24 CFR Part 903.7 9 (h)]
Applicability: Section 8 only PHAs are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C.

1437p)) in the plan Fiscal Year? (If "No", skip to next component; if

"yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description
(Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition
Disposition
3. Application status (select one)
Approved
Submitted, pending approval
Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one)
Part of the development
Total development
7. Relocation resources (select all that apply) Section 8 for units
Public housing for units
Preference for admission to other public housing or section 8
Other housing for units (describe below)
8. Timeline for activity:
a. Actual or projected start date of activity:
b. Actual or projected start date of relocation activities:
c. Projected end date of activity:
4. Voucher Homeownership Program [24 CFR Part 903.7 9 (k)]
A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)
B. Capacity of the PHA to Administer a Section 8 Homeownership Program The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):
5. Safety and Crime Prevention: PHDEP Plan 24 CFR Part 903.7 (m)]
Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the apcoming year?
C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
D. Yes No: The PHDEP Plan is attached at Attachment
6. Other Information (24 CFR Part 903.7 9 (r))
A. Resident Advisory Board (RAB) Recommendations and PHA Response
1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment G
3. In what manner did the PHA address those comments? (select all that apply) The PHA changed portions of the PHA Plan in response to comments A list of these changes is included Yes No: below or
Yes No: at the end of the RAB Comments in Attachment G. Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment G
Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1.	Consolidated Plan jurisdiction: (provide name here) Commonwealth of Kentucky
	The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
2	 ☐ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) ☐ Other: (list below)
3.	PHA Requests for support from the Consolidated Plan Agency Yes ☑ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4.	The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
	The Consolidated Plan of Kentucky and the PHA Plan concur in the objectives of preservation of housing units through modernization enabling the production of safe, decent and affordable housing for low income renter households through sound management efforts.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority of Pineville defines "substantial deviation" as a change in the capital budget and/or 5-Year PHA Plan of 50% or more of non-emergency work items that would require resubmission of an updated Plan.

The Housing Authority of Pineville has made no substantial deviations from the 5-Year Plan Policy as outlined in the 2000 Agency Plan submitted to HUD.

B. Significant Amendment or Modification to the Annual Plan:

The Housing Authority of Pineville will consider the following actions to be significant amendments or modifications:

- Changes to rent or admissions policies or organization of the waiting list with the exemption of HUD mandated changes in these policies
- Addition of non-emergency work items in the amount of 50% of the budget (items not included in the current Annual Statement or 5-Year Action Plan).

The Housing Authority of Pineville has not made significant amendments or modifications to the Annual Plan except those that are adopted to reflect changes in HUD regulatory requirements.

Attachment_A_

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Revi		
Applicable &	Supporting Document	Related Plan Component	
On Display			
	PHA Plan Certifications of Compliance with the PHA Plans and	5 Year and Annual	
X	Related Regulations	Plans	
	State/Local Government Certification of Consistency with the	5 Year and Annual	
	Consolidated Plan (not required for this update)	Plans	
	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair	5 Year and Annual Plans	
X	housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.		
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs	
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources	
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies	
X	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination	
X	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination	
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination	

List of Supporting Documents Available for Review						
Applicable	Supporting Document	Related Plan				
& O D'1		Component				
On Display	Public housing management and maintenance policy documents,	Annual Plan:				
X						
Λ	including policies for the prevention or eradication of pest	Operations and				
	infestation (including cockroach infestation)	Maintenance				
37	Results of latest binding Public Housing Assessment System	Annual Plan:				
X	(PHAS) Assessment	Management and				
	THE DISTRICT OF STREET	Operations				
**	Follow-up Plan to Results of the PHAS Resident Satisfaction	Annual Plan:				
X	Survey (if necessary)	Operations and				
		Maintenance and				
		Community Service &				
		Self-Sufficiency				
	Results of latest Section 8 Management Assessment System	Annual Plan:				
	(SEMAP)	Management and				
		Operations				
	Any required policies governing any Section 8 special housing	Annual Plan:				
	types	Operations and				
	check here if included in Section 8 Administrative	Maintenance				
	Plan					
	Public housing grievance procedures	Annual Plan:				
X	check here if included in the public housing	Grievance Procedures				
	A & O Policy					
	Section 8 informal review and hearing procedures	Annual Plan:				
	check here if included in Section 8 Administrative	Griewnce Procedures				
	Plan	Griculted Frocedures				
	The HUD-approved Capital Fund/Comprehensive Grant Program	Annual Plan: Capital				
X	Annual Statement (HUD 52837) for any active grant year	Needs Needs				
Λ	Most recent CIAP Budget/Progress Report (HUD 52825) for any					
X		Annual Plan: Capital Needs				
Λ	active CIAP grants Approved HOPE VI applications or, if more recent, approved or					
	submitted HOPE VI Revitalization Plans, or any other approved	Annual Plan: Capital Needs				
		Needs				
	proposal for development of public housing	Ammuel Dlame Cam'rel				
v	Self-evaluation, Needs Assessment and Transition Plan required	Annual Plan: Capital Needs				
X	by regulations implementing §504 of the Rehabilitation Act and	riceds				
	the Americans with Disabilities Act. See, PIH 99-52 (HA).	Ammuel Diam.				
	Approved or submitted applications for demolition and/or	Annual Plan: Demolition and				
	disposition of public housing					
	Approved on submitted applications for Julian time of a 11'	Disposition				
	Approved or submitted applications for designation of public	Annual Plan:				
	housing (Designated Housing Plans)	Designation of Public				
	A	Housing				
	Approved or submitted assessments of reasonable revitalization of	Annual Plan:				
	public housing and approved or submitted conversion plans	Conversion of Public				
	prepared pursuant to section 202 of the 1996 HUD Appropriations	Housing				
	Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937					
	Approved or submitted public housing homeownership	Annual Plan:				
programs/plans		Homeownership				
	Policies governing any Section 8 Homeownership program	Annual Plan:				
	(sectionof the Section 8 Administrative Plan)	Homeownership				

List of Supporting Documents Available for Review						
Applicable & On Display	Supporting Document	Related Plan Component				
1 1	Cooperation agreement between the PHA and the TANF agency	Annual Plan:				
	and between the PHA and local employment and training service agencies	Community Service & Self-Sufficiency				
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency				
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency				
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other	Annual Plan:				
	resident services grant) grant program reports	Community Service & Self-Sufficiency				
	The most recent Public Housing Drug Elimination Program	Annual Plan: Safety				
	(PHEDEP) semi-annual performance report	and Crime Prevention				
	PHDEP-related documentation:	Annual Plan: Safety				
	 Baseline law enforcement services for public housing developments assisted under the PHDEP plan; 	and Crime Prevention				
	· Consortium agreement/s between the PHAs participating					
	in the consortium and a copy of the payment agreement					
	between the consortium and HUD (applicable only to					
	PHAs participating in a consortium as specified under 24 CFR 761.15);					
	Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded					
	activities;					
	 Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and 					
	All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.					
	Policy on Ownership of Pets in Public Housing Family	Pet Policy				
	Developments (as required by regulation at 24 CFR Part 960,					
X	Subpart G) Check here if included in the public housing A & O Policy					
	The results of the most recent fiscal year audit of the PHA	Annual Plan: Annual				
	conducted under section 5(h)(2) of the U.S. Housing Act of 1937	Audit				
X	(42 U. S.C. 1437c(h)), the results of that audit and the PHA's					
	response to any findings Troubled PHAs: MOA/Recovery Plan	Troubled PHAs				
	Other supporting documents (optional)					
	(list individually; use as many lines as necessary)	(specify as needed)				
X	Community Service & Self-Sufficiency Policy	Community Service & Self-Sufficiency Policy				
X	Pet Policy	Pet Policy				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CF **Grant Type and Number** Capital Fund Program: KY36P039-502(01) Capital Fund Program **Housing Authority of Pineville** Replacement Housing Factor Grant No: **⊠Original Annual Statement** Reserve for Disasters/ Emergencies Revised Annu Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report **Total Estimated Cost Summary by Development Account** No. **Original** Revised O Total non-CFP Funds 2 1406 Operations 3 1408 Management Improvements \$3,000 4 1410 Administration \$3,000 5 1411 Audit 1415 liquidated Damages 6 1430 Fees and Costs \$48,600 7 1440 Site Acquisition 8 9 1450 Site Improvement \$56,173 10 1460 Dwelling Structures \$211,000 11 1465.1 Dwelling Equipment—Nonexpendable 20,000 12 1470 Nondwelling Structures 1475 Nondwelling Equipment 30,000 13 1485 Demolition 14 15 1490 Replacement Reserve 1492 Moving to Work Demonstration 16 1495.1 Relocation Costs 17 1498 Mod Used for Development 18 1502 Contingency 19 20 Amount of Annual Grant: (sum of lines 2-19) \$371,773 21 Amount of line 20 Related to LBP Activities Amount of line 20 Related to Section 504 Compliance Amount of line 20 Related to Security 23 Amount of line 20 Related to Energy Conservation 24 Measures **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CF **Part II: Supporting Pages** PHA Name: **Grant Type and Number** Capital Fund Program #: KY36P039-502(01) Capital Fund Program Housing Authority of Pineville Replacement Housing Factor #: General Description of Major Work Quantity **Total Estimated Cost** Development Dev. Acct No. Number Categories Name/HA-Wide Original Revised

Activities

HA-Wide

HA-Wide

HA-Wide

HA-Wide

HA-Wide

Training

M/C Fees

A/E Fees

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CF Part II: Supporting Pages

Tart II. Sup	por ung r ages					
PHA Name: Housing Aut	chority of Pineville	Grant Type and Number Capital Fund Program #: KY36P039-502(01) Capital Fund Program Replacement Housing Factor #:				
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estim	nated Cost	
Name/HA-Wide Activities				Original	Revised	
HA-Wide	Sidewalk Replacement	1450		\$15,000		
HA-Wide	Site Lighting	1450		\$5,000		
HA-Wide	Playground Equipment	1450		\$10,000		
KY39-01	Additional Parking	1450		\$26,173		
KY39-01	Wood trim replacement/wrap with metal	1460		\$15,000		
KY39-04	Clean Siding	1460		\$10,000		
KY39-04	Window Replacement	1460		\$151,000		
KY39-04	Entry Door Replacement	1460		\$35,000		
HA-Wide	Stoves & Refrigerators	1465		\$20,000		
HA-Wide	Maintenance Equipment	1475		\$30,000		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CF Part III: Implementation Schedule

Turt III: Imprementation Seneaure							
PHA Name:			t Type and Nu				Federal FY
Housing Authority of Pi	neville			m #: KY36P039-50			
	T		Capital Fund Program Replacement Housing Factor #:				
Development Number		Fund Obliga	=				
Name/HA-Wide	(Qu	art Ending D			uarter Ending Date	Ending Date)	
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	3-31-03			9-30-04			
KY39-01	3-31-03			9-30-04			
KY39-04	3-31-03			9-30-04			

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

	CFP 5-Year Action Plan]
○ Original statement			
Development	Development Name		
Number	(or indicate PHA wide)		
KY39-001	Wallsend & Maple		
_	ed Physical Improvements or Management	Estimated Cost	Planned Start Date
Improvements			(HA Fiscal Year)
Repair Porches Tuckpoint foundation Picnic Shelter Landscaping Playground Equipm Tot Lot Interior painting (50)		25,000 10,000 8,000 5,000 40,000 12,000 40,000	2002 2002 2002 2002 2003 2004 2004
Total estimated cost	over next 5 years	140,000	
C4-1 E 11		/	

Capital Fund Program 5-Year Action Plan

CFP 5-Year Action Plan				
☐ Original statement ☐ Revised statement				
Development	Development Name			
Number	(or indicate PHA wide)	İ		
KY39-002	Northside & Wallsend			
Description of Needed Physical Improvements or Management		Estimated Cost	Planned Start Da	
Improvements			(HA Fiscal Year)	

Repair Porches	25,000	2002
Tuckpoint foundations & brick facades	15,000	2002
Picnic Shelters (2)	15,000	2002
Landscaping	5,000	2002
Roofing	84,000	2002
Furnaces & A/C Units (80 @ \$2,250/each)	180,000	2003
Garbage pits (3 @ \$5,000/each)	15,000	2004
Vinyl siding – Maintenance Building	10,800	2004
Interior Painting (80 @ \$750/each)	60,000	2004
Through-Wall A/C Units (40 @ \$3,500)	140,000	2005
Total estimated cost over next 5 years	549,800	

○ Original statement ○ Original s	CFP 5-Year Action Plan		
Development	Development Name		_
Number	(or indicate PHA wide)		
- (4	(02 3333000 2 3332)		_
KY39-004	Highland		
	ed Physical Improvements or Management	Estimated Cost	Planned Start Date
Improvements			(HA Fiscal Year)
Landscaping Picnic Shelter Entrance Signs & L Interior Painting (3)		5,000 10,000 8,000 22,500	2003 2004
Total estimated cost	t over next 5 years	45,500	

◯ Original stateme	CFP 5-Year Action Plan		
Development	Development Name		
Number	(or indicate PHA wide)		
	(or more and a second		
KY39-007	Orchard Hill		
_	ed Physical Improvements or Management	Estimated Cost	Planned Start Date
Improvements			(HA Fiscal Year)
Roofing	nents ighting (40 @ \$320/each) 0 @ \$750/each) nks (40 @ \$350/each)	5,000 75,000 45,000 10,200 12,800 30,000 14,000 125,000	2002 2002 2003 2004 2004 2004 2005
Total estimated cost	over next 5 years	317,000	

	CFP 5-Year Action Plan		
○ Original state	ement Revised statement		
Development	Development Name		
Number	(or indicate PHA wide)		
PHA-Wide	PHA-Wide		
Description of Ne	eded Physical Improvements or Management	Estimated Cost	Planned Start Date
Improvements			(HA Fiscal Year)
Van for Residents		25,000	2002
Office Furniture		5,000	2002
Landscaping		12,000	2003
Maintenance Tru	ck	30,000	2003
Computer Equip	ment	10,000	2004
Tree Trimming		16,500	2004
Landscaping		10,500	2004
Parking Lot Patch	h and Repair	5,000	2004
Parking Lot Vacu	ıum	6,000	2004
Snow Blower		8,500	2004
Carbon Monoxide	e Detectors	25,000	2004
Sidewalks		15,000	2005
Landscaping		10,000	2005
Stoves & Refriger	rators	15,000	2005
Cleaning Vinyl Si	ding	12,000	2005
Total estimated co	ost over next 5 years	205,500	

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History				
A. Amount of PHDEP Grant \$				
B. Eligibility type (Indicate with an "x")	N1 N	2	R	
C. FFY in which funding is requested				
D. Executive Summary of Annual PHDEP I	Plan			
In the space below, provide a brief overview of the PHDI undertaken. It may include a description of the expected esentences long	EP Plan, including highlig			
E. Target Areas				
Complete the following table by indicating each PHDEP conducted), the total number of units in each PHDEP Tar participate in PHDEP sponsored activities in each Target available in PIC.	get Area, and the total nu	mber of indivi	iduals expected	to
	T =			
PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	be Serve	pulation to ed within EP Target ea(s)	
F. Duration of Program Indicate the duration (number of months funds will be rec	quired) of the PHDEP Pro	ogram propose	ed under this Pla	an (place
an "x" to indicate the length of program by # of months.				•
12 Months 18 Months_	24 Months_			
G. PHDEP Program History				
Indicate each FY that funding has been received under the provide amount of funding received. If previously funder submission, indicate the fund balance and anticipated correct of Date of Submission of the PHDEP Plan. The Grant Towaivers. For grant extensions received, place "GE" in collections.	d programs <u>have not</u> been upletion date. The Fund E erm End Date should incl	closed out at Balances shoul	the time of this d reflect the ba	lance as

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY PHDEP Budget Summary					
Original statement	•				
Revised statement dated:					
Budget Line Item	Total Funding				
9110 – Reimbursement of Law Enforcement					
9115 - Special Initiative					
9116 - Gun Buyback TA Match					
9120 - Security Personnel					
9130 - Employment of Investigators					
9140 - Voluntary Tenant Patrol					
9150 - Physical Improvements					
9160 - Drug Prevention					
9170 - Drug Intervention					
9180 - Drug Treatment					
9190 - Other Program Costs					
TOTAL PHDEP FUNDING					

PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PH	IDEP Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDE	Other Funding	
	Persons	Population	Date	Complete	P	(Amount/	
	Served	-		Date	Funding	Source)	
1.							
2.							
3.							

9115 - Special Initiative					Total PHD	EP Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	
1.							
2.							
3.							

9116 - Gun Buyback TA Match				Total PHE	DEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP F	unding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	
	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served			Date			
1.							
2.							
3.							

9130 – Employment of In	Total PHDEP F	unding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP F	Funding: \$	
Goal(s)					-		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9150 – Physical Improvement	Total PHDEP Funding: \$						
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9160 - Drug Prevention	Total PHDE	Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding	
	Persons	Population	Date	Complete	Funding	(Amount /Source)	
	Served			Date			
1.							
2.							
3.							

9170 - Drug Intervention	Total PHDEP I	Funding: \$				
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)
1.						
2.						
3.						

9180 - Drug Treatment					Total PHDE	P Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

Required Attachment E: Resident Member on the PHA Governing Board

1. X Yes	No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)								
A. Name of res	. Name of resident member(s) on the governing board: Floyd Douglas Williams								
B. How was th	B. How was the resident board member selected: (select one)? Elected Appointed								
C. The term of	C. The term of appointment is (include the date term expires): 11-11-02								
	2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain):								
. Date of nex	Date of next term expiration of a governing board member:								
	. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):								

Robert Lee Madon, Mayor of Pineville

Required Attachment F: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Pauline Adkins Charlotte Howard Patricia Cloud Cora Fuson Bytha LeFevers

Required Attachment G: Comments of Resident Advisory Board or Boards & Explanation of PHA Response

COMMENTS	PHA RESPONSE
New Windows	Budgeted in 2002
Neighborhood Watch	Program being established
Outdoor water spigots	PHA to consider
Trash Dumpster	PHA has adequate garbage receptacles
Trim trees	Budgeted for 2001
Step @ 305 Wallsend	Concrete work budgeted in 2000
Landscaping	Budgeted in 2000 and 2001
Playground and Ball Goal	Playground Equipment budgeted in 2001
Clean Siding	Budgeted in 2001
Site Lighting	Budgeted in 2000